## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V56129

**FILED** Feb 25, 2011 Secretary of State

Entity Name: ONCOLOGY & RADIATION ASSOCIATES, P.A.

**New Principal Place of Business: Current Principal Place of Business:** 

9350 S.W. 72ND STREET SUITE 200 MIAMI, FL 33173

**Current Mailing Address: New Mailing Address:** 

200 S. BISCAYNE BLVD. 9350 S.W. 72ND STREET SUITE 200 SUITE 3900 MIAMI, FL 33131 MIAMI, FL 33173 US

FEI Number: 65-0349562 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPRATT, WILLIAM J JR. PARAPAR, JOSE 9350 SW 72ND ST 200 S. BÍSCAYNE BLVD. SUITE 200 **SUITE 3900** MIAMI, FL 33131 US MIAMI, FL 33173 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOSE PARAPAR 02/25/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

TERCILLA, OSCAR M.D. Name: 8881 N.W. 18TH TERRACE Address:

City-St-Zip: MIAMI, FL 33172

Title: DΡ

Name: ANTUNEZ DE MAYOLO, JORGE C M.D. 3659 S MIAMI AVENUE, SUITE 2001 Address:

MIAMI, FL 33133 City-St-Zip:

Title: DST

RAVELO, RAUL M.D. Name: 3663 S. MIAMI AVENUE Address: City-St-Zip: MIAMI, FL 33133

Title: CEO

PARAPAR, JOSE Name:

Address: 9350 S.W 72ND STREET, SUITE 200

City-St-Zip: MIAMI, FL 33173

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: OSCAR TERCILLA MD DV 02/25/2011